



National Aeronautics and
Space Administration
Goddard Space Flight Center
Greenbelt, Maryland 20771

REQUEST, AUTHORIZATION, AGREEMENT AND CERTIFICATION OF TRAINING

OFFICE USE ONLY

SECTION I - INITIATING OFFICE

1. NAME OF APPLICANT (<i>Last, First, M.I.</i>)		2. CODE OF APPLICANT	
3. JOB TITLE	4. TEL. EXT.	5. FAX NUMBER	6. E-MAIL ADDRESS
7. POSITION LEVEL <input type="checkbox"/> A. NON-SUPERVISORY <input type="checkbox"/> B. SUPERVISORY	8. FUNDING SOURCE <input type="checkbox"/> DIRECTORATE <input type="checkbox"/> CENTER <input type="checkbox"/> NASA <input type="checkbox"/> OTHER (e.g., R&D etc.) _____		
IF TRAINING IS OFF-SITE COMPLETE ITEMS 9-13 (otherwise skip items 9-13)			
9. NAME OF ORGANIZATION CONDUCTING TRAINING		10. LOCATION OF TRAINING (<i>City & State</i>)	
11. ADDRESS (<i>Including ZIP Code</i>), PHONE AND FAX NUMBERS OF ORGANIZATION TO WHICH NASA SHOULD SEND PAYMENT			
12. TRAINING COSTS A. TUITION _____ B. BOOKS _____ C. FEES/OTHER _____ D. TRAINING TOTAL _____			
13. TRAVEL COSTS A. TRAVEL _____ B. PER DIEM _____ C. OTHER _____ C. TRAVEL TOTAL _____			
14. IF THIS COURSE IS ON-SITE AND YOU REQUIRE SPECIAL ACCOMMODATIONS, PLEASE CHECK HERE <input type="checkbox"/>			
15. COURSE TITLE (<i>If off-site attach a copy of the course description and the cost information</i>)			16. CATALOG/COURSE # (<i>If applicable</i>)
17. CENTER-FUNDED ACADEMIC PROGRAMS (<i>Please indicate if course is part of any of the following</i>) <input type="checkbox"/> A. USP <input type="checkbox"/> B. PTGSP <input type="checkbox"/> C. RSFP <input type="checkbox"/> D. WRI <input type="checkbox"/> E. COOP <input type="checkbox"/> F. OTHER _____			
18. COURSE DATES (<i>Mo., day, yr.</i>) A. From _____ A. To _____		19. NO. OF COURSE HOURS A. DURING DUTY _____ B. NON-DUTY _____	
20. IF ACADEMIC, NUMBER OF CREDITS			
21. JUSTIFICATION FOR TRAINING <input type="checkbox"/> RELATED TO CURRENT/FUTURE JOB DUTIES <input type="checkbox"/> RELATED TO NASA MISSION <input type="checkbox"/> OTHER (<i>Brief justification required; you may attach separate document</i>)			

SECTION II - RECOMMENDED APPROVALS AND SIGNATURES

NOTICE - If training is Academic signature at right (item 22) constitutes an agreement to continue in service, per conditions on reverse ►		22. SIGNATURE OF APPLICANT	23. DATE
24. NAME AND TITLE OF IMMEDIATE SUPERVISOR		25. SIGNATURE	26. DATE
27. NAME AND TITLE OF SECOND LEVEL SUPERVISOR		28. SIGNATURE	29. DATE
30. NAME OF DIRECTORATE TRAINING COORDINATOR	31. FAX#	32. SIGNATURE	33. DATE

SECTION III - GODDARD TRAINING/PROCUREMENT OFFICE

34. TRAINING APPROVED <input type="checkbox"/> A. YES <input type="checkbox"/> B. NO		35. AMOUNT	36. SIGNATURE OF TRAINING OFFICIAL	37. DATE
38. SAP ENTRY A. INITIALS _____ B. DATE _____		39. SENT TO ACCOUNTING A. INITIALS _____ B. DATE _____		40. SIGNATURE OF CONTRACTING OFFICER
41. DATE				
42. COST CTR _____ WBS _____ ORDER _____ FUND _____		43. DOCUMENT/ PURCHASE ► S- [] [] [] [] [] - [] ORDER NO.		
44. AUTHORIZED REIMBURSEMENT AMOUNT UP TO:		45. CREDIT CARD PAYMENT _____ INITIALS _____ DATE _____		
46. P. ORG. _____ CAGE CODE _____		47. BILLING INSTRUCTIONS (<i>Furnish invoice to:</i> Cost and Commercial Accounts Department NASA Goddard Space Flight Center, Code 155, Bldg 17 Greenbelt Road, Greenbelt MD 20771		

PRIVACY ACT NOTICE

GENERAL - This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974). December 31, 1974, for and as amended individuals completing Federal nomination for training forms.

AUTHORITY - The Government Employees Training Act of 1953 (U.S. Code, Title 5, Sections 4101 to 4118).

PURPOSES AND USES - The information on this form is used in the administration of the Federal Training Program. The purpose of this form is to document the nomination of trainees and completion of training; and it serves as the principal repository of personal, fiscal and administrative information about trainees and the programs in which they participate. The form becomes a part of the permanent employment record of participants in training programs and is included in the Government's Central Personnel Data File.

Effect of Nondisclosure - Personal information provided on this form is given on a voluntary basis, as is participation in any training program. Failure to provide this information, however, may result in ineligibility for participation in training programs.

OBLIGATED SERVICE AGREEMENT

For all NASA-funded academic training, employees incur a period of obligated service equal to three times the length of the training. This means that the employee agrees to remain in the employment of NASA for the obligated service period, which begins at the conclusion of the course. Time spent attending the class during non-duty hours and time granted off from work is counted in the total hours of training. (However, if an employee attends class during duty time granted off from work, class time is not counted).

EXAMPLE:

Employee attends a three-credit course during duty hours, and receives 8 hours off per week to attend class and study/prepare class assignments.

8 hours X 15 weeks = 120 hours off for the semester

120 X 3 = 360 hours (this is the period of obligated service)

Obligated service period begins at the conclusion of the semester in which the course occurs.

REIMBURSEMENT:

If an employee fails to complete the period of obligated service, he or she is obligated to pay back a proportional share of training funds expended.

EXAMPLE CONTINUED:

Employee works off 180 hours of the 360 hours obligation. The employee therefore owes 50% of the training funds expended.